



APPLICATION DATA SHEET

Application Information

Application Type::	Regular
Title::	Electrosurgical Apparatus and Methods for Cutting Tissue
Attorney Docket Number::	G-4
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	63
Small Entity?::	Yes

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Scott
Middle Name::	A.
Family Name::	Ciarrocca
City of Residence::	Stockton
Country of Residence::	USA
Street of mailing address::	4 Myers Lane
City of mailing address::	Stockton
State or Province of mailing address::	New Jersey
Country of mailing address::	USA
Postal or Zip Code of mailing address::	08559

RECEIVED

OCT 28 2003

TECHNOLOGY CENTER R3700

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Francois
Family Name:: Antounian
City of Residence:: San Francisco
Country of Residence:: USA
Street of mailing address:: 2400 Broadway Street
City of mailing address:: San Francisco
State or Province of mailing address:: California
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94115

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Jean
Family Name:: Woloszko
City of Residence:: Mountain View
Country of Residence:: USA
Street of mailing address:: 1694 Columbia Drive
City of mailing address:: Mountain View
State or Province of mailing address:: California
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: H.
Family Name:: Dahla
City of Residence:: Sunnyvale
Country of Residence:: USA
Street of mailing address:: 787 N. ~~Faireaks~~ Fair Oaks Avenue, #2
City of mailing address:: Sunnyvale
State or Province of mailing address:: California
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94086

Correspondence Information

Correspondence Customer Number:: 021394
Name:: ArthroCare Corporation
Street of mailing address:: 680 Vaqueros Avenue
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94085-3523
Phone number:: (408) 736-0224
Fax Number:: (408) 530-9143
E-Mail address:: jraffle@arthrocare.com rbatt@arthrocare.com

Representative Information

Representative Customer Number:: 021394

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/326,664	October 2, 2001
This Application	Continuation-in-part of	09/780,745	February 9, 2001
09/780,745	Non-Provisional of	60/182,751	February 16, 2000
09/780,745	Continuation-in-part of	09/162,117	September 28, 1998
09/162,117	Continuation-in-part of	08/977,845	November 25, 1997

Assignee Information

Assignee name:: ArthroCare Corporation
Street of mailing address:: 680 Vaqueros Avenue
City of mailing address:: Sunnyvale
State or Province of mailing address:: California
Postal or Zip Code of mailing address:: 94085-3523